

ANNUAL STATEMENT

For the Year Ending December 31, 200__

Of the condition and affairs of the _____ Mutual Fire Insurance Company
of _____, in the State of New Hampshire, made to the Insurance
Commissioner in pursuance of the laws of said State.

Incorporated, _____, 19 ____ Commenced Business, _____, 19 ____

President, _____ P.O. Address _____

Secretary, _____ P.O. Address _____

Treasurer, _____ P.O. Address _____

DIRECTORS

_____	P.O. Address, _____	_____	P.O. Address, _____
_____	P.O. Address, _____	_____	P.O. Address, _____
_____	P.O. Address, _____	_____	P.O. Address, _____
_____	P.O. Address, _____	_____	P.O. Address, _____
_____	P.O. Address, _____	_____	P.O. Address, _____

I.		
1. Ledger assets (as per balance) December 31 of previous year*		\$
II-INCOME.		
2. Gross cash premiums on all business written during the year**.. \$		
3. Deduct return premiums.....		
4. Total net premiums written.....	\$	
5. Assessments actually received without deduction for commissions or expense:		
(a) On current year's assessments..... \$		
(b) On previous year's assessments..... \$		
6. Total assessments received.....	\$	
7. Policy fees as written in policies issued during the year***	\$	
8. Total paid by policy-holders		\$
9. Gross interest and rents from all sources (give items and amounts):		
10. _____ \$		
11. _____		
12. _____		
13. Total interest and rents		
14. Money borrowed during year (gross)		
15. From all other sources, viz. (give items and amounts):		
16. _____		
17. _____		
18. _____		
19. Total income during year	\$	
20. Total (sum of lines 1 and 19).....	\$	

* This amount should agree with the amount on page 2, line 28, of last year's statement.
** Include premiums as written in policies issued, extra premiums, charges for permits, etc.
*** Policy fees should be accounted for, whether they are actually received by the company or not.

III.-DISBURSEMENTS			
1. Paid for losses (including \$ _____ occurring in previous years).....	\$		
2. Expenses of adjustment and settlement of losses.....			
3. Agent's commissions on premiums.....\$ _____			
4. Policy fees retained by agents..... _____			
5. Total paid agents (lines 3 and 4).....			
6. Paid for making assessments.....\$ _____			
7. Paid for collecting assessments..... _____			
8. Total expense of making and collecting assessments (lines 6 and 7).....			
9. Officers and employees, services *\$ _____; fees, \$ _____.....			
10. Borrowed money repaid, \$ _____; interest paid, \$ _____.....			
11. Insurance department fees.....			
12. Rent, \$ _____; Taxes, \$ _____; Advertising, \$ _____			
Printing and stationary, \$ _____; Postage, Telegraph, telephone and express, \$ _____			
13. All other disbursements (give items and amounts):			
14. _____			
15. _____			
16. _____			
17. Total disbursements.....		\$	
18. Balance, difference between lines 20, line 1, and 17, Page 2.....			
		\$	
IV.-LEDGER ASSETS			
19. Cash in company's office**.....\$ _____			
20. Cash in banks (give names and amounts):			
21.....			
22. Total cash, lines 19, 20 and 21.....	\$		
23. Book value of notes, bonds, or other securities (not including premium notes) as per schedule B.....			
24. Premiums, due and unpaid to company on policies issued.....			
25. Other ledger assets (give items and amounts):			
26.....	\$		
27.....			
28. Total ledger assets as per balance***.....			
NON-LEDGER ASSETS			
29. Unpaid Assessments (Current Year).....	\$		
30. Unpaid Assessments (Previous Year).....			
31. Furniture and fixtures.....			
32. Other property of the company (items and amounts):.....			
33.			
34. Interest Due and Accrued (items and amounts):.....			
35.....			
36. Total non-ledger assets.....			
37. Gross assets.....			

*Not including amount returned in any other item.

**Include cash in hand of secretary and treasurer, not deposited.

***This amount must agree with line 18, this page.

NOTE: A statement should be filed with this Department, signed by the officers of the company, setting forth the Policy Number, Name of the Assured, and the amount of uncollectible policy premiums or assessments approved at the annual meeting and deducted under Items 1 and 2, Page 3 of this annual statement form.

DEDUCT ASSETS NOT ADMITTED			
1. Total unpaid assessments, (this amount should be approved at Annual Meeting).....		\$	
2. Total unpaid premiums, (this amount should be approved at Annual Meeting).....		\$	
3. Furniture and fixtures.....			
4. Other items.....			
5.....			
6. Total non-admitted.....			\$
7. Total admitted assets (line35, Page 2, less line 6, this page).....			\$
8. Losses adjusted and unpaid.....			
9. Losses reported, not adjusted (estimated).....		\$	
10. Losses resisted.....			
11. Total unpaid losses as per schedule A.....			\$
12. Due for borrowed money: Principal. \$ _____ ; Interest, \$ _____			
13. Due officers and employees: Services, \$ _____ ; Expenses, \$ _____			
14. All other liabilities, viz:			
15. Reserve for collection of assessments.....			
16. Surplus.....			
17. Total Liabilities and Surplus.....			\$

GENERAL ITEMS.	Amount Insured	Face Value of Premium Notes
18. Policies in force Dec. 31, _____, as shown by your last annual report to the Insurance Commissioner.....	\$	\$
19. Policies written and renewed during the year.....		
20. Total.....	\$	\$
21. Deduct policies expired, canceled or terminated during the year.....		
22. Policies in force Dec. 31, _____.....	\$	\$
23. <u>Deduct amount of payment for premiums or assessments on premium notes</u>	XXXXXXXXXXXX	
24. Balance due on premium notes.....	XXXXXXXXXXXX	\$

25. Losses incurred during the year, \$ _____ ; Largest sum insured in a single risk, \$ _____

26. Assessments levied on premium notes during the year, \$ _____

27. Date of last assessment, _____ ; Amount collected, \$ _____ ; Basis for last assessment _____

28. Period covered by last assessment, _____ ; Amount of losses incurred for which last assessment was made, \$ _____

29. What per cent of the amount insured is the premium note? _____ ; What per cent of the premium note is the cash premium? _____

30. Are policy premiums and assessments listed on premium note as required? _____ ; Amount of policy fee, \$ _____

31. How is policy fee disposed of? _____

State of New Hampshire)
) ss.
County of _____)

The Undersigned, _____, President,
and _____, Secretary, and _____, Treasurer
being duly sworn, do severally, upon their oaths, depose and say that they are respectively the above described officers of said company, and that the foregoing statement contains and is a just, full and true statement and exhibit of all the Assets, Liabilities, Income and Expenditures, and of the general condition of affairs of said company on the thirty first day of December last, and for the year ending on that day, and that all items, facts and answers are fairly and correctly stated and given, without evasion or reservation.

President
Secretary
Treasurer

Subscribed and Sworn to this _____ day of _____.

Before me,

Justice of the Peace/Notary Public

